

25<sup>th</sup> February 2019

Dear Parent/Carer

**Re: Family STEM event - Trebuchet Tournament - 20<sup>th</sup> March 2019**

In order to celebrate science week I am writing to inform you that you and your children have been invited to attend a family science challenge of science activities at Birches Head Academy.

This event will be held on 20<sup>th</sup> March 2019 – 2:45pm - 5pm. Activities start at 3pm. Refreshments will be provided throughout the activity.

The aim of the workshop is to promote Science, Technology, Engineering and Maths and to do this the school is hosting a Trebuchet Tournament. In teams students will build, test and modify a model trebuchet which should successfully launch a projectile over a 20cm wall. Prizes will be given for the most effective model.

The activity is open to all students in Year 7 and 8. Please feel free to bring any other family members who would like to take part including other children.

Yours sincerely

Lynn Brammer  
Science Co-ordinator



**Please return this permission slip to Student Reception by 15<sup>th</sup> March 2019**

Student Name .....Form .....

	Yes	No
I give permission for my child to attend the Science Family Stem Activity of the <b>Trebuchet Tournament</b> on <b>20<sup>th</sup> March</b>	<input type="checkbox"/>	<input type="checkbox"/>
I give permission for my child's photographs/video images to be used by the Academy. This may be used for displays, celebratory events, published in local or national newspapers, or on approved websites/social media and publications.	<input type="checkbox"/>	<input type="checkbox"/>
I will be bringing additional children to the event	<input type="checkbox"/>	<input type="checkbox"/>
My child will make their own way home after the event	<input type="checkbox"/>	<input type="checkbox"/>
My child will be collected after the event at 5pm	<input type="checkbox"/>	<input type="checkbox"/>

Please state your contact number, .....  
this will be used in emergencies only

Signed .....(to be signed by person with legal parental responsibility)

Print name .....(of the person with legal parental responsibility)

Please note: visit permission **must** also be agreed on annual data/consent sheets.